PTO/SB/17 (07-05) Approved for use through 01/31/2007, OMB 0861-0032 U.S. Petert and Trademerk Office; U.S. DEPARTMENT OF COMMERCE Under the Peperwork Reduction Act of 1995 no persons are required to respond to a collection of information unless it displays a valid OMB control number Complete if Known Effective on 12/08/2004. RECEIVED Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/684,655 CENTRAL FAX CENTER Application Number RANSMIT Filing Date 10/14/2003 NOV 0 3 2006 For FY 2006 First Named Inventor KELLER ET AL Examinar Name MAI, TRI M Applicant claims small entity status. See 37 CFR 1.27 Art Unit 3781 TOTAL AMOUNT OF PAYMENT 120.00 EC106-GN009 Attorney Docket No. METHOD OF PAYMENT (check all that apply) Other (please identify): Check L Credit Card L Money Order None Deposit Account Name: TAFT STETTINIUS & HOLLIST ✓ Deposit Account Deposit Account Number: 50-3072 For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) ✓ Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) ✓ Credit any overpayments under 37 CFR 1.16 and 1.17

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card Information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES SEARCH FEES **EXAMINATION FEES** FILING FEES Small Entity Small Entity Small Entity Fees Paid (\$) Fee (\$) Fee (5) Fee (5) Application Type Fee (\$) Fee_(\$) Fee_(5) 300 150 500 250 200 100 Utility 130 Design 200 100 100 50 65 Plant 200 100 300 150 160 80 300 500 600 300 Reissuo 150 250 200 n n **Provisional** 100 0 0 Small Entity 2. EXCESS CLAIM FEES Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 200 100 Each independent claim over 3 (including Reissues) 360 180 Multiple dependent claims Multiple Dependent Claims Fee Paid (\$) Total Claims Extra Claims Fee (\$) Foe Paid (5) Fee (\$) - 20 or HP = HP = highest number of total claims paid for, if greater than 20. Fee Paid (\$) Indep. Claims Extre Claims Fee (\$) - 3 or HP = HP - highest number of independent claims paid for, if greater than 3, APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (5) Total Sheets (round up to a whole number) / 50 = 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) 120.00 Other (e.g., late filing surcharge): (1251) EXTENSION WILLONE MONTH

SUBMITTED BY		
Signature Apple	Registration No. 44,248	Telephone 513-357-9610
Name (Print/Type) JOHN M. MUELLER		Date 11-03-2006

This collection of Information is required by 37 CFR 1,136. The Information is required to obtain or retein a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is assimpted to take 30 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will very department on its amount of time you require to complete this form end/or exgessions for oduring this burden, should be sent to the Chief information Officer. U.S. Petents and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT-SEND FEES/OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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